

						•			
	in this information to identify your control Christopher								
Dei	otor 1 Christopher	A Janczak			_				
	otor 2				_				
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF PENNSYLVA	NIA					
Cas	se number 17-12739					Check if this is	:		
(If kr	nown)					■ An amend	ed filing		
								postpetition llowing date:	chapter
0	fficial Form 106I					MM / DD/	YYYY		
S	chedule I: Your Inc	ome				,,			12/1
atta	use. If you are separated and you ch a separate sheet to this form. t1: Describe Employment Fill in your employment					I case number (if	known). Ar	nswer every	
	information.					Debtor	Debtor 2 or non-filing spouse		
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed ■ Not employed	ed		■ Empl	oyed employed		
	employers.	Occupation				Real es	state admi	n asst.	
	Include part-time, seasonal, or self-employed work.	Employer's name				LARDA	V, INC.		
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed to	here?				3 months		
Par	t 2: Give Details About Mor	othly income							
Esti spou	mate monthly income as of the dause unless you are separated. u or your non-filing spouse have mo	ate you file this form. If	,	·			·	•	J
mor	e space, attach a separate sheet to	this form.				For Debtor 1	For Deb	tor 2 or	
						. 31 203101 1		ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	2,752.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$ 2	2,752.00	

Debtor 1		Christopher A Janczak	_	Case number (if known)		17-12739			
				For	Debtor 1	For Deb			
	Con	y line 4 here	4.	\$	0.00	\$	2,752.00		
				*_	0.00		2,702.00		
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	0.00	\$	0.00		
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	•	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	0.00		
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	0.00		
	5e.	Insurance	5e.	\$	0.00	\$	0.00		
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00		
	5g.	Union dues	5g.	\$_	0.00	\$	0.00		
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	0.00		
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	0.00		
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	2,752.00		
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$	1,500.00	\$	0.00		
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	•	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00		
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	0.00	•	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	•	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00		
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	i	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,500.00	\$	0.00		
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$		1,500.00 + \$	2,752.	00 = \$	4.252.00	
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				_,,-		1,202100	
11.	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines				a, if it	2. \$	4,252.00	
							Combin		
13.	Do y	you expect an increase or decrease within the year after you file this form' No. Yes. Explain:	?				monthly	y income	

Official Form 106I Schedule I: Your Income page 2

	in this informa	ation to identify yo	our case:								
	tor 1	Christopher				Ch	eck if	this is:			
DCD	tor r	Christopher	A Janicza	1K		- Cii		amended filing			
Deb	tor 2					_		· ·	ving postpetition ch	anter	
(Spouse, if filling)						13 expenses as of the following date:					
Unit	ed States Bank	ruptcy Court for the	: EASTE	RN DISTRICT OF PENNS	YLVANIA		MN	// DD / YYYY			
Cas	e number 1	7-12739									
	nown)										
Of	fficial Fo	orm 106J									
		J: Your	Exner	202						12/15	
Be info	as complete ormation. If m nber (if know	and accurate as	possible. eded, atta ry questio	If two married people ar ch another sheet to this							
1.	Is this a joi										
	■ No. Go to	o line 2. es Debtor 2 live i	in a separa	ate household?							
		lo	•								
	□Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expen</i> ses	for Separate Househ	old of De	ebtor	2.			
2.	Do you hav	e dependents?	■ No								
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2			Dependent's age	Does dependent live with you?	t 	
	Do not state								□ No		
	dependents	names.							☐ Yes		
									□ No		
									☐ Yes ☐ No		
									☐ Yes		
									□ res □ No		
									☐ Yes		
3.	Do your ex	penses include		No					— 103		
		of people other t	han $_{f \Box}$	Yes							
	yourself an	d your depende	nts? —								
		nate Your Ongoi									
exp		a date after the l		uptcy filing date unless y y is filed. If this is a supp							
				government assistance it							
	value of suc ficial Form 10		d have inc	luded it on Schedule I: Y	our Income			Your expe	enses		
4.		or home owners		ses for your residence. In	nclude first mortgage	4.	\$		0.00		
	. ,	ded in line 4:	J : : : : :								
	4a. Real	estate taxes				4a.	\$		0.00		
		erty, homeowner's	s, or renter	's insurance		4b.			0.00		
		•		ıpkeep expenses		4c.	_		0.00		
		eowner's associat	•			4d.	· : —		0.00		
5.	Additional	mortgage paymo	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00		

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Debtor 1 Christopher A Janczak	Case number (if known)	17-12739
6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	200.00
6b. Water, sewer, garbage collection	6b. \$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	160.00
6d. Other. Specify:	6d. \$	0.00
7. Food and housekeeping supplies	7. \$	400.00
8. Childcare and children's education costs	8. \$	0.00
9. Clothing, laundry, and dry cleaning	9. \$	40.00
10. Personal care products and services	10. \$	
and the second s	·	20.00
•	11. \$	150.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12. \$	200.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
Charitable contributions and religious donations	14. \$	0.00
5. Insurance.	ιμ. ψ	0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	0.00
15d. Other insurance. Specify:	15d. \$	0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		0.00
Specify:	16. \$	0.00
7. Installment or lease payments:		0.00
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not report that you did not you did not report that you did not you d		0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 1		0.00
9. Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	
0. Other real property expenses not included in lines 4 or 5 of this form or on	Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	600.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
Other: Specify: spouses separate expenses	21. +\$	2,000.00
· · · - · · · · · · · · · · · · · · · ·		2,000.00
2. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	3,770.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	6J-2 \$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,770.00
		,
3. Calculate your monthly net income.	00- ^	4.050.00
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,252.00
23b. Copy your monthly expenses from line 22c above.	23b\$	3,770.00
22a Cubtract your monthly are a few and the few and th		
23c. Subtract your monthly expenses from your monthly income.	23c. \$	482.00
The result is your monthly net income.	200. [Ψ	.52100
24. Do you expect an increase or decrease in your expenses within the year af	ter you file this form?	
For example, do you expect to finish paying for your car loan within the year or do you expect		ease or decrease because o
modification to the terms of your mortgage?	,	
■ No.		
Yes. Explain here:		